

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF TEXAS
EL PASO DIVISION

In re

GOOD TIME STORES, INC.,

Debtor.

§
§
§
§
§

Case No. 15-31243-HCM-11

MOTION FOR INTERIM APPROVAL OF USE OF CASH COLLATERAL

TO THE HONORABLE H. CHRISTOPHER MOTT, UNITED STATES BANKRUPTCY JUDGE:

Now comes the Debtor-in-Possession GOOD TIME STORES, INC. and through its counsel files this Motion for Interim Approval of Use of Cash Collateral, and would show:

1.

Petition date in these proceedings is August 7, 2015.

2.

GOOD TIME STORES, INC. is a Texas business corporation that operates a group of convenience stores. It has creditors who are secured by liens on the Debtor's inventory of convenience store merchandise, among other collateral.

3.

The Debtor presently has a staff of 30 employees. Payrolls occur every week; the next one is scheduled for August 14, 2015. The Debtor chiefly needs to use cash collateral to pay its employees, to pay for utilities, and to replenish its merchandise.

4.

The cash collateral consists of an inventory of convenience store merchandise, including food, beverages (beer and wine and mixed beverages), sundries, paper goods, and picnic and auto supplies, having an estimated value of \$35,000, and gasoline and diesel fuel having an estimated value of \$2,000.00. The cash collateral also includes the cash proceeds of the inventory.

5.

Debtor can afford to reorganize and present a confirmable Plan if given a reasonable time, within the contemplated statutory limits, to do so.

6.

There are multiple liens on file against the Debtor that affect the cash collateral. In order of temporal priority, these are as follows:

- 1) Perfected financing statements on inventory and gasoline inventory dating back to 2009 (#09-0000202962), and 2010 (10-0025443100) since renewed and assigned and now held by Pineda NPL-F2, LLC whose address is 99 High St., 7th Floor, Boston, MA 02110 and whose counsel is Mr. Brad Gordon of Reese, Gordon & Marketos, LLC, 750 N. St. Paul St. #610, Dallas, TX 75201.
- 2) Federal tax liens filed centrally against the Debtor corporation by the UNITED STATES INTERNAL REVENUE SERVICE (“IRS”), on January 25, 2013 for \$115,990.64, on December 31, 2014 for \$21,095.94, on March 3, 2015 for \$31,169.84, on February 27, 2015 for \$1,076.56, and on June 12, 2015 for \$51.87.
- 3) A State Tax lien filed by the Texas Comptroller of Public Accounts on July 2, 2015 for \$1,668.08.
- 4) A State Tax lien filed by the Texas Comptroller on June 26, 2015 for \$3,000.26, against “GTS BEVERAGE, INC.” GTS BEVERAGE, INC. is an alter ego of the Debtor.

7.

Copies of the foregoing liens are hereto appended.

8.

In order of lawful priority, the IRS liens have all been on file for at least 45 days, and they accordingly prime the contractual liens of NPL-F2, LLC under 26 U.S.C. § 6331. The federal tax liens are superior to the TEXAS COMPTROLLER's liens because the IRS filed its liens earlier.

9.

As interim adequate protection Debtor proposes:

- a) To make adequate protection payments of \$1,000.00 on the 20th of each month to the IRS at INTERNAL REVENUE SERVICE INSOLVENCY SECTION, Mail Stop 5026 AUS, Austin, TX 78701;
- b) To ask the Court to award a replacement lien to the IRS in the amount of the cash collateral's petition-date value;
- c) To maintain the replacement collateral at a level generally no less than what was on hand on petition date;
- d) To use the cash collateral only in the ordinary course of business;
- e) To make available on-line its Monthly Operating Reports, on their due dates in this case; and
- f) To file all post-petition tax reports and returns on a timely basis, and to pay all post-petition taxes on a timely basis.

10.

IRS, in reliance upon the proposing of the above measures, has consented to the use of its cash collateral on an interim basis. The undersigned attorney is notifying the IRS and all other

lienholders of this Motion.

WHEREFORE, PREMISES CONSIDERED, Debtor prays that interim authorization to use cash collateral be granted, upon the terms described above.

Respectfully submitted this 7th day of August, 2015.

/s/ E.P. Bud Kirk
E.P. BUD KIRK
Texas State Bar No. 11508650
600 Sunland Park Dr.
Building Four, Ste. 400
El Paso, TX 79912
(915) 584-3773
(915) 581-3452 facsimile
budkirk@aol.com

Attorney for Debtor

CERTIFICATE OF SERVICE

I do hereby certify that on the 7th day of August, 2015 did cause a copy of the foregoing Motion for Interim Approval of Use of Cash Collateral to be mailed to U.S. Trustee, P.O. Box 1539, San Antonio, TX 78205-1539; to Good Time Stores, Inc., c/o Bruce Nelson, 901 N. Resler Dr., El Paso, TX 79912; to Internal Revenue Service, Centralized Insolvency Office, P.O. Box 7346, Philadelphia, PA 19101-7346; to IRS Insolvency Office, 300 E. 8th Street, Mail Stop 5026AUS, Austin, TX 78701; to Steven B. Bass, U.S. Attorney's Office, 816 Congress Ave., Ste. 1000, Austin, TX 78701; to Texas Comptroller of Public Accounts, Revenue Accounting Division-Bankruptcy Section, P.O. Box 13528, Austin, TX 78711; and to Victor Monsisvais, Texas Comptroller's Office, 401 E. Franklin, El Paso, TX 79901.

/s/ E.P. Bud Kirk
E.P. BUD KIRK

4508-MC-080715

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

CT Lien Solutions
2727 Allen Parkway Suite 1000
Houston, TX 77019
USA

FILING NUMBER: 09-0000202962

FILING DATE: 01/05/2009 01:01 PM

DOCUMENT NUMBER: 241647720009

FILED: Texas Secretary of State

IMAGE GENERATED ELECTRONICALLY FOR EDI FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

OR	1a. ORGANIZATION'S NAME GOOD TIME STORES, INC.			
	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 7108 Airport Rd		CITY El Paso	STATE TX	POSTAL CODE 79925
1d. TAX ID# SSN OR EIN		1e. TYPE OF ORGANIZATION Corporation	1f. ORG JURISDICTION TX	1g. ORG. ID #, if any 0033816200 <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

OR	2a. ORGANIZATION'S NAME			
	2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2d. TAX ID# SSN OR EIN		2e. TYPE OF ORGANIZATION	2f. ORG JURISDICTION	2g. ORG. ID #, if any NONE <input type="checkbox"/>

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME COMPASS BANK			
	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 132 AUSTIN AVENUE		CITY WEATHERFORD	STATE TX	POSTAL CODE 76086
				COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:
ALL FURNITURE, FIXTURES, EQUIPMENT and GASOLINE INVENTORY; WHETHER ANY OF THE FOREGOING IS OWNED NOW OR ACQUIRED LATER; ALL ACCESSIONS, ADDITIONS, REPLACEMENTS, AND SUBSTITUTIONS RELATING TO ANY OF THE FOREGOING; ALL RECORDS OF ANY KIND RELATING TO ANY OF THE FOREGOING; ALL PROCEEDS RELATING TO ANY OF THE FOREGOING (INCLUDING INSURANCE, GENERAL INTANGIBLES, AND OTHER ACCOUNTS PROCEEDS).

5. ALTERNATIVE DESIGNATION [if applicable]: ☐ LESSEE/LESSOR ☐ CONSIGNEE/CONSIGNOR ☐ BAILEE/BAILOR ☐ SELLER/BUYER ☐ AG. LIEN ☐ NON-UCC FILING

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2
[ADDITIONAL FEE] [optional]

8. OPTIONAL FILER REFERENCE DATA

34527720

FILING OFFICE COPY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Crowson & Crowson LLP 915-533-7717	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Crowson & Crowson LLP P.O. Box 221170 El Paso, TX 79913 USA	

FILING NUMBER: 10-0025443100
FILING DATE: 09/01/2010 10:56 AM
DOCUMENT NUMBER: 324759020002
FILED: Texas Secretary of State
IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names					
OR	1a. ORGANIZATION'S NAME Good Time Stores, Inc.				
	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 7108 Airport Road			CITY El Paso	STATE Tx	POSTAL CODE 79925
1d. TAX ID# SSN OR EIN	ADD'L DEBTOR INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION Corporation	1f. ORG JURISDICTION Texas	1g. ORG. ID #, if any 0033816200 <input type="checkbox"/> NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (2a or 2b) - do not abbreviate or combine names					
OR	2a. ORGANIZATION'S NAME				
	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE
2d. TAX ID# SSN OR EIN	ADD'L DEBTOR INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. ORG JURISDICTION	2g. ORG. ID #, if any <input type="checkbox"/> NONE	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only <u>one</u> secured party name (3a or 3b)					
OR	3a. ORGANIZATION'S NAME Compass Bank				
	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 690 Sunland Park Drive			CITY El Paso	STATE Tx	POSTAL CODE 79912
4. This FINANCING STATEMENT covers the following collateral: All presently existing or hereafter acquired accounts receivable and rights to payment of any kind, furniture, fixtures, equipment and inventory and all proceeds therefrom.					
5. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING					
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Attach Addendum (if applicable)			7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2 [ADDITIONAL FEE] [optional]		
8. OPTIONAL FILER REFERENCE DATA					

FILING OFFICE COPY

UCC FINANCING STATEMENT AMENDMENT**FOLLOW INSTRUCTIONS**

A. NAME & PHONE OF CONTACT AT FILER (optional) Capitol Services, Inc.
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Capitol Services, Inc. 800 Brazos St. #400 Austin, TX 78701

RECEIVED
SEP 22 2014
CLK 88

14-00302102

09/22/2014 12:32 PM



FILED

TEXAS
SECRETARY OF STATE

SOS



569178480005

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
100025443100 9/1/2010

1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. For: Attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. ☐ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☒ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**

Check one of these two boxes:

This Change affects ☐ Debtor or ☐ Secured Party of record

AND Check one of these three boxes to:

☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c

☐ ADD name: Complete item 7a or 7b, and item 7c

☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME Pineda Beneficiary LLC			
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (new exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)			
7a. ORGANIZATION'S NAME Pineda NPL-F2 LLC			
OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

7c. MAILING ADDRESS c/o Capital Crossing Servicing Company, LLC, 88 High St. - 7th Floor	CITY Boston	STATE MA	POSTAL CODE 02110	COUNTRY USA
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8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) 9b is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME Pineda Beneficiary LLC			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:** Debtor: Good Time Stores, Inc.

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11) International Association of Commercial Administrators (IACA)

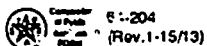
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) CSC
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 USA

FILING NUMBER: 15-00089245
FILING DATE: 03/25/2015 03:12 PM
DOCUMENT NUMBER: 598090610001
FILED: Texas Secretary of State
IMAGE GENERATED ELECTRONICALLY FOR XML FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 10-0025443100		1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13										
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of the Secured Party authorizing this Termination Statement												
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b <u>and</u> address of Assignee in item 7c <u>and</u> also name of Assignor in item 9. For partial assignment, complete item 7 and 9 <u>and</u> also indicate affected collateral in item 8												
4. <input checked="" type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law												
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes. This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. <u>AND</u> Check <u>one</u> of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, <u>and</u> item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b.												
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)												
<table border="1"> <tr> <td colspan="4">6a. ORGANIZATION'S NAME</td> </tr> <tr> <td>OR</td> <td>6b. INDIVIDUAL'S SURNAME</td> <td>FIRST PERSONAL NAME</td> <td>ADDITIONAL NAME(S)/INITIAL(S)</td> <td>SUFFIX</td> </tr> </table>				6a. ORGANIZATION'S NAME				OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX								
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only <u>one</u> name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)												
<table border="1"> <tr> <td colspan="4">7a. ORGANIZATION'S NAME</td> </tr> <tr> <td>OR</td> <td>7b. INDIVIDUAL'S SURNAME</td> <td>FIRST PERSONAL NAME</td> <td>ADDITIONAL NAME(S)/INITIAL(S)</td> <td>SUFFIX</td> </tr> </table>				7a. ORGANIZATION'S NAME				OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX								
<table border="1"> <tr> <td>7c. MAILING ADDRESS</td> <td>CITY</td> <td>STATE</td> <td>POSTAL CODE</td> <td>COUNTRY</td> </tr> </table>				7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY				
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY								
8. <input type="checkbox"/> COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:												
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor												
<table border="1"> <tr> <td colspan="4">9a. ORGANIZATION'S NAME Pineda Grantor Trust II</td> </tr> <tr> <td>OR</td> <td>9b. INDIVIDUAL'S SURNAME</td> <td>FIRST PERSONAL NAME</td> <td>ADDITIONAL NAME(S)/INITIAL(S)</td> <td>SUFFIX</td> </tr> </table>				9a. ORGANIZATION'S NAME Pineda Grantor Trust II				OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
9a. ORGANIZATION'S NAME Pineda Grantor Trust II												
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX								
10. OPTIONAL FILER REFERENCE DATA: Debtor: Good Times Stores, Inc. [97755551]												

FILING OFFICE COPY



2. ■

Do not write in the space above

T. Code ■ 26515
 LIMITED SALES, EXCISE, AND USE TAX
TEXAS STATE TAX LIEN

County Clerk Of
 EL PASO County
 104 CITY-COUNTY BLDG
 EL PASO TX 79901

For Comptroller's use only		
3. Taxpayer number ■ 1-74-1786364-8	4. Period ■ 1503	
5. Audit rec. ■ 000	6. County ■ 071	7. Uniq. no. ■ 03
8. Recording date ■	9. Volume ■	10. Page ■
11. Instrument/Document number ■		

COUNTY CLERK: Please record this Texas State Tax Lien in the "State Tax Liens Book" of your county as provided by law. Enter your county filing data in the space designated below.

Return this lien when recorded to: **COMPTROLLER OF PUBLIC ACCOUNTS**

111 E. 17th Street
 Austin, Texas 78774-0100.

Notice is hereby given that a lien exists in favor of the State of Texas for delinquent taxes/fees. All taxes/fees, fines, penalties and interest due to the State of Texas were assessed by statute and were secured as of the assessment date by a statutory lien on all real and personal property owned, claimed or acquired by the taxpayer named below.

Taxpayer identification:

GOOD TIME STORES, INC.
 7108 AIRPORT RD
 EL PASO TX 79906-4909

PERIOD OF LIABILITY	TYPE OF TAX/FEE	AMOUNT OF LIEN
03/01/2015 through 03/31/2015	STATE	1,128.89
	CITY	269.59
	TRANSIT	134.80
	COUNTY	134.80
	S P D	0.00
TOTAL AMOUNT OF LIEN		\$ 1,668.08

This lien is cumulative and in addition to all other liens provided by law and is sufficient to cover all taxes/fees, fines, penalties and interest of any nature or type which may have accrued before or after the filing of this notice.

This notice is made as required by TEX. TAX CODE ANN. ch. 113 and all other relevant provisions of law.

Given under my hand and seal of office at the City of Austin, Texas, this 26th day of June, 2015



Glenn Hegar
 GLENN HEGAR
 COMPTROLLER OF PUBLIC ACCOUNTS

County Clerk certification and recording information

FILED FOR RECORD
 IN MAY OFFICE
 2015 JUL -2 PM 2:30
 EL PASO COUNTY CLERK
 EL PASO COUNTY, TEXAS

RC

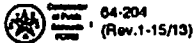
Doc# 20150046083
#Pages 1 #NFPages 1
7/6/2015 10:17:36 A
Filed & Recorded in
Official Records of
El Paso County
Dalia Briones
County Clerk
Fees \$16.00

I hereby certify that this instrument was filed on the date and time stamped hereon by me and was duly recorded by document number in the Official Public Records of Real Property in El Paso County.



Dalia Briones

EL PASO COUNTY, TEXAS



Doc# 20150046082

T. Code ■ 26515
LIMITED SALES, EXCISE, AND USE TAX
TEXAS STATE TAX LIEN

County Clerk Of
 EL PASO County
 104 CITY-COUNTY BLDG
 EL PASO TX 79901

Do not write in this space above

For Computer Use only	
3. Taxpayer number ■ 1-30-03727	4. Page ■ 1503
5. Audit rec. ■ 000	6. County ■ 08
7. Recording date	8. Page ■ 10
11. Instrument/Document number	

COUNTY CLERK: Please record this Texas State Tax Lien in the "State Tax Liens Book" of your county as provided by law. Enter your county filing data in the space designated below.

Return this lien when recorded to: **COMPTROLLER OF PUBLIC ACCOUNTS**
 111 E. 17th Street
 Austin, Texas 78774-0100.

Notice is hereby given that a lien exists in favor of the State of Texas for delinquent taxes/fees. All taxes/fees, fines, penalties and interest due to the State of Texas were assessed by statute and were secured as of the assessment date by a statutory lien on all real and personal property owned, claimed or acquired by the taxpayer named below.

Taxpayer Identification:

GTS BEVERAGE, INC.
 7108 AIRPORT RD
 EL PASO TX 79906-4909

PERIOD OF LIABILITY	TYPE OF TAX/FEE	AMOUNT OF LIEN
03/01/2015 through 03/31/2015	STATE	2,365.29
	CITY	317.47
	TRANSIT	158.75
	COUNTY	158.75
	S P D	0.00
TOTAL AMOUNT OF LIEN		\$ 3,000.26

This lien is cumulative and in addition to all other liens provided by law and is sufficient to cover all taxes/fees, fines, penalties and interest of any nature or type which may have accrued before or after the filing of this notice.

This notice is made as required by TEX. TAX CODE ANN. ch. 113 and all other relevant provisions of law.

Given under my hand and seal of office at the City of Austin, Texas, this 26th day of June, 2015



GLENN HEGAR
 COMPTROLLER OF PUBLIC ACCOUNTS

County Clerk certification and recording information

FILED FOR RECORD
 IN MY OFFICE
 2015 JUL -2 PM 2:29
 EL PASO COUNTY TEXAS

RC

Doc# 20150046082
#pages 1 #nfrpages 1
Filed & Recorded in
7/6/2015 10:17:36 AM
Official Records of
El Paso County
Dalia Briones
County Clerk
Fees \$16.00

I hereby certify that this instrument was filed on the date and time stamped
hereon by me and was duly recorded by document number in the Official
Public Records of Real Property in El Paso County.



Dalia Briones

EL PASO COUNTY, TEXAS

Form 668 (Y)(c) (Rev. February 2004)	3592	Department of the Treasury - Internal Revenue Service Notice of Federal Tax Lien
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Area: SMALL BUSINESS/SELF EMPLOYED AREA #5 Lien Unit Phone: (800) 913-6050	Serial Number 918703113	For Optional Use by Recording Office
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As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer **GOOD TIME STORES INC, a Corporation**

Residence **7108 AIRPORT RD
EL PASO, TX 79906-4909**

13-0003725112
02/04/2013 05:00 PM

FILED
 TEXAS
 SECRETARY OF STATE
SOS

464266710006



IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refilled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
941	09/30/2012	74-1786364	12/31/2012	01/30/2023	115990.64

Place of Filing <div style="text-align:right"> Secretary of State Austin, TX 78711 </div>	Total	\$ 115990.64
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This notice was prepared and signed at NASHVILLE, TN, on this,



the 25th day of January, 2013.

Signature for HARTMUT MUELLER	Title REVENUE OFFICER (915) 834-6563 25-05-2441
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(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax Lien Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Part 1 - Kept By Recording Office

Form 668(Y)(c) (Rev. 2-2004)
 CAT. NO 60025X

Form 668 (Y)(c) (Rev. February 2004)		11953 Department of the Treasury - Internal Revenue Service Notice of Federal Tax Lien			
Area: SMALL BUSINESS/SELF EMPLOYED AREA #5 Lien Unit Phone: (800) 913-6050		Serial Number 137173414		For Optional Use by Recording Office	
As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.				15-0001264493 01/12/2015 05:00 PM  FILED <small>TEXAS SECRETARY OF STATE</small> SOS  586508670021	
Name of Taxpayer GOOD TIME STORES INC, a Corporation					
Residence 7108 AIRPORT RD EL PASO, TX 79906-4909					
IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refilled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).					
Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
941	06/30/2014	74-1786364	10/06/2014	11/05/2024	21095.94
Place of Filing <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Secretary of State Austin, TX 78711 </div> <div style="text-align: right;"> Total \$ 21095.94 </div> </div>					

RECEIVED
 JAN 12 2015
 CLK 18

This notice was prepared and signed at NASHVILLE, TN, on this,

the 31st day of December, 2014.

Signature <i>Cheryl Cordaro</i> for J. C. ESTRADA	Title REVENUE OFFICER (915) 834-6574
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(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien
 Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Part 1 - Kept By Recording Office

Form 668(Y)(c) (Rev. 2-2004)
 CAT. NO 60025X

Form 668 (Y)(c) (Rev. February 2004)	11953	Department of the Treasury - Internal Revenue Service Notice of Federal Tax Lien
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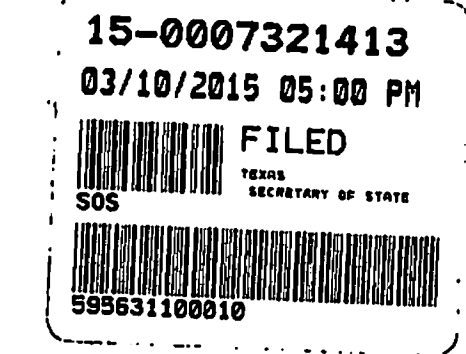
Area: SMALL BUSINESS/SELF EMPLOYED AREA #5 Lien Unit Phone: (800) 913-6050	Serial Number 146260215	For Optional Use by Recording Office
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As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer **GOOD TIME STORES INC, a Corporation**

Residence **7108 AIRPORT RD
EL PASO, TX 79906-4909**

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).



Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
941	09/30/2014	74-1786364	02/16/2015	03/18/2025	31169.84

Place of Filing					
	Secretary of State			Total	\$ 31169.84
	Austin, TX 78711				

This notice was prepared and signed at NASHVILLE, TN, on this, the 03rd day of March, 2015.

Signature <i>Cheryl Cordova</i> for J. C. ESTRADA	Title REVENUE OFFICER (915) 834-6574	25-05-2413
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(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien
Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Part 1 - Kept By Recording Office

Form 668(Y)(c) (Rev. 2-2004)
CAT. NO 60025X

11953 Form 668 (Y)(c) (Rev. February 2004)		Department of the Treasury - Internal Revenue Service Notice of Federal Tax Lien				
Area: SMALL BUSINESS/SELF EMPLOYED AREA #5 Lien Unit Phone: (800) 913-6050		Serial Number <div style="text-align: right;">145913815</div>		For Optional Use by Recording Office <div style="text-align: right; font-size: 1.2em;">15-0007342961</div> <div style="text-align: right;">03/10/2015 05:00 PM</div> <div style="text-align: right;"> FILED <small>TEXAS SECRETARY OF STATE</small> 595644680027 </div> <div style="text-align: right; margin-top: 20px;"> </div>		
As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.						
Name of Taxpayer GOOD TIME STORES INC, a Corporation						
Residence 7108 AIRPORT RD EL PASO, TX 79906-4909						
IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).						
Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)	
941	03/31/2014	74-1786364	06/30/2014	07/30/2024	1076.56	
Place of Filing <div style="text-align: center;"> Secretary of State Austin, TX 78711 </div>					Total \$	1076.56

This notice was prepared and signed at NASHVILLE, TN, on this, 27th day of February, 2015.

Signature <i>Cheryl Cordery</i> for J. C. ESTRADA	Title REVENUE OFFICER (915) 834-6574	25-05-2413
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(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien
Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Part 1 - Kept By Recording Office

Form 668(Y)(c) (Rev. 2-2004)
CAT. NO 60025X

Form 668 (Y)(c) (Rev. February 2004)	11953	Department of the Treasury - Internal Revenue Service Notice of Federal Tax Lien
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Area: SMALL BUSINESS/SELF EMPLOYED AREA #5 Lien Unit Phone: (800) 913-6050	Serial Number 162021215	For Optional Use by Recording Office
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As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer **GOOD TIME STORES INC, a Corporation**

Residence **7108 AIRPORT RD
EL PASO, TX 79906-4909**

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refilled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

15-0020396127
06/22/2015 05:00 PM



FILED
 TEXAS
 SECRETARY OF STATE



613209600005

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 JUN 22 2015
 CLK 19

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
940	12/31/2014	XX-XXX6364	04/20/2015	05/20/2025	51.87

Place of Filing <div style="text-align:center"> Secretary of State Austin, TX 78711 </div>	Total	\$ 51.87
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This notice was prepared and signed at NASHVILLE, TN, on this,

the 12th day of June, 2015.

Signature <i>Cheryl Cordaro</i> for J. C. ESTRADA	Title REVENUE OFFICER (915) 834-6574
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25-05-2413

(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien
 Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Part 1 - Kept By Recording Office

Form 668(Y)(c) (Rev. 2-2004)
 CAT. NO 60025X